CSRA

North Carolina Department of Health and Human Services (NC DHHS)

Division of Medical Assistance (DMA)
Division of Mental Health (DMH)
Division of Public Health (DPH)

Standard Companion Guide Transaction Information Instructions related to Transactions based on ASC X12 Implementation Guides, version 005010X221A1 Health Care Claim Payment/Advice (835), for MMIS NCTracks starting July 1, 2013

Disclosure

The information in this document is subject to change. Changes will be posted via the NCTracks website located at https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

Preface

This Companion Guide (CG) to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with NCTracks. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

The Communications/Connectivity component is included in the Companion Guide when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

The Transaction Instruction component is included in the Companion Guide when the publishing entity wants to clarify the IG instructions for submission of specific electronic transactions. The Transaction Instruction component content is limited by ASCX12's copyrights and Fair Use statement.

Table of Contents

1. Transaction Instruction (TI) Introduction

1.1 SCOPE

This Companion Guide provides specific requirements for sending the Health Care Claim Payment/Advice to NCTracks Trading Partners. This document provides information about the Payment Advice using CAQH CORE compliance rules. It supplements the ASC X12N 835 (005010X221) Health Care Implementation Guide and should only be used for the purpose of clarification.

For more information about CAQH-CORE rules, go to http://www.caqh.org.

1.2 OVERVIEW

The Health Care Claim Payment/Advice Companion Guide has been written to assist you in designing and implementing 835 transactions to meet NCTracks processing standards and CAQH CORE certified solution. This Companion Guide must be used in conjunction with the Health Care Claim Payment/Advice Companion Guide (835) instructions as set forth by the ASC X12 Standards for Electronic Data Interchange (Version 005010X221).

1.2.1 What is CAQH?

CAQH stands for the Council for Affordable and Quality Healthcare. It is a nonprofit alliance of health plans, provider networks, and associations with a goal to provide a variety of solutions to simplify health care administration.

1.2.2 What is CORE?

CORE stands for the Committee on Operating Rules for Information Exchanges. CORE consists of a group of health plans, providers, vendors, Centers for Medicare & Medicaid Services (CMS) and other government agencies, associations, regional entities, standard-setting organizations, and other healthcare entities that are facilitated by CAQH. CORE's goal is to create, disseminate, and maintain operating rules that enable health care providers to quickly and securely obtain reliable health care eligibility and benefits information. It will decrease the amount of time and resources providers spend verifying patient eligibility, benefits, and other administrative information at the point of care.

1.2.3 What is CAQH-CORE Certification?

An entity that creates or transmits eligibility data is eligible to become CAQH-CORE certified. The entity must agree to follow the CAQH-CORE operating rules and will be expected to exchange eligibility and benefits information per the requirements of the CORE Phase II rules and policies. To view the CORE Phase II rules and policies, go to http://www.caqh.org.

1.3 REFERENCES

- ASC X12 Version 5010 Implementation Guides: http://www.wpc-edi.com
- CAQH/CORE: http://www.caqh.org/benefits.php
- SOAP: http://www.w3.org/TR/soap/
- MIME Multipart: http://www.w3.org/Protocols/rfc1341/7_2_Multipart.html
- CORE XML Schema: http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd
- Washington Publishing Company: www.wpc-edi.com.
- ASC X12 Organization: http://www.x12.org/
- United States Department of Health and Human Services (HHS): www.aspe.hhs.gov/admnsimp
- Workgroup for Electronic Data Interchange (WEDI): www.wedi.org
- North Carolina Department of Health and Human Services: www.ncdhhs.gov
- North Carolina Division of Medical Assistance: http://www.ncdhhs.gov/dma/

2. Getting Started

2.1 WORKING WITH NCTRACKS

The following table identifies the X12N Implementation Guides for all of the transactions supported by NCTracks. Companion guides are available for each of the transactions.

Section 10 of this document provides information specific to the 835 Health Care Claim Payment/Advice transaction set, as defined in the ASC/X12N 005010X221 Health Care Claim Payment/Advice Technical Report 3 (TR3) dated August 2006, and updated by:

- Errata 005010X212A1 Health Care Claim Status Request and Response dated June 2010

Unique ID	Name
005010X222	Health Care Claim: Professional (837P)
005010X223	Health Care Claim: Institutional (837I)
005010X224	Health Care Claim: Dental (837D)
005010X228	Health Care Claim Pending Status Information (277P)
005010X279	Health Care Eligibility Benefit Inquiry and Response (270/271)
005010X221	Health Care Claim Payment/ Advice (835)
005010X212	Health Care Claim Status Request and Response (276/277)
005010X220	Benefit Enrollment and Maintenance (834)
005010X218	Payroll Deducted and Other Group Premium Payment for Insurance Products (820)
005010X231	Implementation Acknowledgment for Health Care Insurance (999)

Pharmacy claims are submitted using the National Council for Prescription Drug Program's (NCPDP) D.0 format. Please refer to the D.0 Companion Guide for NCPDP D.0 claim formatting used by NCTracks.

2.2 TRADING PARTNER REGISTRATION

An Electronic Data Interchange (EDI) Trading Partner is any entity (provider, billing service, software vendor, employer group, financial institution, clearinghouse, etc.) that transmits electronic data to or receives electronic data from another entity.

Trading partner registration, which includes electronic signature of the Trading Partner Agreement (TPA) and generation of the Transaction Supplier Number (TSN), is an online process. Clearinghouses, service bureaus, trading partners, billing agents, and other entities that intend to exchange electronic transactions with NCTracks must sign the TPA and be enrolled into NCTracks.

Please refer to Section 2.2, Trading Partner Registration, of the NCTracks Trading Partner Connectivity Guide for information on Trading Partner Registration. This document can be obtained from https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

2.3 CERTIFICATION AND TESTING OVERVIEW

NCTracks certifies transaction compliance and requires certification from any external entity to submit inbound X12 transactions. Trading Partners will need to complete a Trading Partner Agreement (TPA) to begin submitting Eligibility transactions. Please refer to the Trading Partner Connectivity Guide for Certification and Testing information. This document can be obtained from https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

3. Testing with the Payer

NCTracks requires testing, or third-party certification, prior to approving a trading partner to submit claims in production. Once trading partner claims are in production, NCTracks reserves the right to require re-testing if it is determined that the trading partner is receiving/generating an unacceptable volume of errors.

Refer to Section 3, Testing and Certification Requirements, of the NCTracks Trading Partner Connectivity Guide. This document can be obtained from https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

4. Connectivity with the Payer/Communications

Please refer to the Trading Partner Connectivity Guide for all connectivity requirements, including CAQH-CORE.

Refer to Section 2.2.2, User Provisioning and Mailbox Creation Steps, of the NCTracks Trading Partner Connectivity Guide for MoveIT/FTP-Batch and CAQH-CORE user provisioning. Refer to Section 4.2.6, CAQH-CORE Phase III Connectivity (835 and 820), of the NCTracks Trading Partner Connectivity Guide for more information concerning connectivity and SOAP and MIME transmissions. This document can be obtained from
https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

5. Contact Information

5.1 ELECTRONIC DATA INTERCHANGE (EDI) TECHNICAL ASSISTANCE

Phone: 1-800-688-6696, option #1

Email: NCMMIS_EDI_SUPPORT@csgov.com

Website: http://www.nctracks.nc.gov/provider/index.html

Companion Guides: http://www.nctracks.nc.gov/provider/guides/index.html

5.2 PROVIDER/TRADING PARTNER ENROLLMENT

Currently Enrolled Provider (CEP), Billing Agent Enrollment
Phone: 1-800-688-6696

Email: NCTracksprovider@nctracks.com

Website: https://www.nctracks.nc.gov/provider/providerEnrollment/

NCTracks Enrollment
Phone: 1-800-688-6696

Email: NCTracksprovider@nctracks.com

Website: https://www.nctracks.nc.gov/content/public/providers/provider-enrollment.html

6. Control Segments/Envelopes

6.1 ISA-IEA

Transactions transmitted during a session are identified by interchange header segment (ISA) and trailer segment (IEA) which form the envelope enclosing the transmission. Each ISA marks the beginning of the transmission (batch) and provides sender and receiver identification.

6.2 GS-GE

EDI transactions of a similar nature and destined for one trading partner may be gathered into a functional group, identified by a functional group header segment (GS) and a functional group trailer segment (GE). Each GS segment marks the beginning of a functional group. There can be many functional groups within an interchange envelope.

6.3 ST-SE

The beginning of each individual transaction is identified using a transaction set header segment (ST), and the end of every transaction is marked by a transaction set trailer segment (SE).

7. Payer-Specific Business Rules and Limitations

7.1 BUSINESS SCENARIOS

The 835 is used to report payment/remittance information to the billing provider for paid and denied claims and financial transactions. 835s are produced weekly.

7.2 SPECIFIC BUSINESS RULES AND LIMITATIONS

Payer information included in the 835 is based on the provider receiving the payment, i.e., DMA, DMH, DPH, or ORHCC.

The 835 transaction is now separated based on the Provider ID assigned to the provider or the Managed Care Organization (MCO) that is affiliated with the Federal Tax ID returned in the 1000B, N104, Payee Identification Code segment. The Provider ID associated with each file will be defined in the name of the 835 file sent to the Trading Partner. Refer to Section 7.3, Naming Standards for Outbound Transactions.

7.3 NAMING STANDARDS FOR OUTBOUND TRANSACTIONS

The following is the naming convention standard for outbound transactions:

[R/F]-[Mailbox ID]-[Timestamp]-[File ID]-[Provider Number]-[Transaction Type]-ISA-0001-.x12

ex: R-BXA12345-140628112722-1417900000000022FF-1234567890-5T-ISA-00001-.x12

Node Name	# of Characters	Description
R/F	1	R: Response F: File
Mailbox ID	8	Alphanumeric characters
Timestamp	12	The timestamp format is YYMMDDHHMMSS.
File ID	18	Alphanumeric characters; the last 2 characters are always FF.
Provider Number	Up to 10	NPI or Atypical ID
Transaction Type	2	01 = TA1 02 = F-File 03 = 999 5A = 820 5E = 834 5R = 277P 5T = 835 09 = 277 10 = 271
ISA-0001	8	This is a static value that will be present for all transactions.

7.4 SCHEDULED MAINTENANCE

NCTracks maintenance will occur Sunday morning from 12:01 a.m. through 4:00 a.m. NCTracks will not be available to submit files during this time.

8. Acknowledgments

For all inbound transactions, a 999 Acknowledgment report will be sent to the trading partner's OUTBOX for retrieval. This report serves as the acknowledgment of the submission of a file. Typically, 999 Acknowledgment reports are available within moments of submission.

9. Trading Partner Agreements

EDI Trading Partner Agreements ensure the integrity of the electronic transaction process. The Trading Partner Agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement.

The Trading Partner Agreement may specify, among other things, the roles and responsibilities of each party to the agreement in conducting standard transactions.

The Trading Partner Agreement information may be obtained from https://www.nctracks.nc.gov/content/public/providers/provider-trading-partners.html.

10. Transaction-Specific Information

The following table contains one or more rows for each segment for which a supplemental instruction is needed.

Legend

Header rows: Midnight blue with white text
Subheader rows: Dandelion gold with black text
Table rows: Alternate row shading with Cornflower blue with black text

005010X221A1 Health Care Claim Payment/Advice (835)

Loop ID	Reference	Name	Codes	Notes/Comments
Header	ISA	Interchange Control Header		
	ISA03	Security Information Qualifier	00	"00" is returned
	ISA05	Interchange ID Qualifier	ZZ	"ZZ" is returned
	ISA06	Interchange Sender ID		NCTracks will send "NCTRACKSBAT" for batch transactions
	ISA07	Interchange ID Qualifier	ZZ	"ZZ" is returned
	ISA08	Interchange Receiver ID		Return Provider's ETIN (Receiver's ETIN) is returned
	ISA11	Repetition Separator	^	"^" is returned
	ISA14	Acknowledgment Requested	0	"0" is returned
	ISA16	Component Element Separator	:	":" is returned
Header	GS	Functional Group Header		
	GS02	Application Sender's Code		NCTracks will send "NCTRACKSBAT" for batch transactions
	GS03	Application Receiver's Code		Return Provider's Electronic Transmitter Identifier Number (ETIN) (Receiver's ETIN) is returned
Header	BPR	Financial Information		
	BPR01	Transaction Error Handling Code	H, I	NCTracks will send "H" for encounters and non-payments; otherwise, "I" will be sent in BPR01
	BPR03	Credit or Debit Flag	C	NCTracks will send "C" in BPR03
	BPR04	Payment Method Code	ACH, CHK, NON	NCTracks will send either "ACH", "CHK", or "NON" in BPR04

Loop ID	Reference	Name	Codes	Notes/Comments
	BPR05	Payment Format Code	CCP	NCTracks will send "CCP" when BPR04 has value of "ACH"
	BPR06	Depository Financial Institution (DFI) Identification Number Qualifier	01	NCTracks will send value of "01" if BPR04 has value of "ACH"
	BPR07	(DFI) Identification Number		NCTracks will send DFI number if BPR04 has value of "ACH"
	BPR08	Account Number Qualifier	DA	NCTracks will send "DA" if BPR04 has value of "ACH"
	BPR09	Sender Bank Account Number		NCTracks will send Bank Account Number if BPR04 has value of "ACH"
	BPR10	Payer Identifier		Company ID of the NCTracks payer. This value should match the TRN03 value.
	BPR12	Depository Financial Institution (DFI) Identification Number Qualifier	01	NCTracks will send value of "01" if BPR04 has value of "ACH"
	BPR13	Receiver or Provider Bank ID Number		NCTracks will send Provider Bank ID Number if BPR04 has value of "ACH"
	BPR14	Account Number Qualifier	DA	NCTracks will send "DA" if BPR04 has value of "ACH"
	BPR15	Receiver or Provider Account Number		NCTracks will send Provider Account Number if BPR04 has value of "ACH"
Header	TRN	Re-association Trace Number		
	TRN02	Check or EFT Trace Number		The EFT Trace number in the Electronic Remittance Advice (ERA) will be linked to the trace number of the payer's bank.
	TRN03	Payer Identifier		Company ID of the NCTracks payer. This value should match the BPR10 value.
	TRN04	Originating Company Supplemental Code		NCTracks will send "NCTracks Activity for 835"
Header	REF	Receiver Identification		
	REF02	Receiver Identifier		NCTracks will return Receiver's ETIN
Header	DTM	Production Date		
	DTM02	Production Date		NCTracks will set this value to Checkwrite cycle cutoff date
1000A	N1	Payer Identification		
	N102	Payer Name	DMA, DPH, DMH, ORHCC	NCTracks is a multi-payer system, so N102 will contain either "DMA", "DPH", "DMH", or "ORHCC".
1000B	N1	Payee Identification		

Loop ID	Reference	Name	Codes	Notes/Comments
	N103	Identification Code Qualifier	FI, XX	NCTracks will set this value to "FI" – Federal Taxpayer's ID Number, for an Atypical provider; otherwise, "XX" – NPI is sent.
	N104	Payee Identification Code		The 835 will be separated based on the Provider ID assigned to the provider or MCO that is affiliated with the Federal Tax ID returned in the 1000B, N104, Payee Identification Code segment. There will be only one (1) Provider ID per 835 file. The Provider ID associated with each file will be defined in the name of the 835 file sent to the MCO. Refer to Section 7.3, Naming Standards for Outbound Transactions.
1000B	REF	Payee Additional Identification		
	REF01	Reference Identification Qualifier	TJ, PQ	NCTracks will set this value to "PQ" Payee Identification for an Atypical provider; otherwise "TJ" Federal Taxpayer's Identification Number is used.
	REF02	Additional Payee Identifier		This field is set to Provider ID if the provider being paid is an atypical provider otherwise it is set to Federal Taxpayer ID number.
2100	CLP	Claim Payment Information		
	CLP06	Claim Filing Indicator Code	MC	NCTracks will set this value to "MC"
	CLP07	Payer Claim Control Number		This field is set to Payer Control Number (ICN) of the claim
2100	NM1	Patient Name		
	NM108	Identification Code Qualifier	MR, MI	NCTracks will set this value to "MR" – Medicaid Recipient ID Number or "MI" Member Identification Number
2100	NM1	Corrected Patient/Insured Name		
	NM101	Entity Identifier Code	74	NCTracks will set this value to "74"
	NM102	Entity Type Qualifier	1	NCTracks will set this value to "1"
2100	NM1	Service Provider Name		
	NM108	Identification Code Qualifier	MC, XX	NCTracks will set this value to "MC" – Medicaid Provider for Atypical or "XX" for NPI
2100	NM1	Corrected Priority Payer Name		
	NM103	Corrected Priority Payer Name		This field is equivalent to the name of the Third Party Insurance Company
	NM108	Identification Code Qualifier	PI	NCTracks will set this value to "PI"

Loop ID	Reference	Name	Codes	Notes/Comments
	NM109	Corrected Priority Payer Identification Number		This field is equivalent to Third Party Insurance ID Number
2100	NM1	Other Subscriber Name		
	NM102	Entity Type Qualifier	1	NCTracks will set this value to "1"
	NM108	Identification Code Qualifier	FI	NCTracks will set this value to "FI" – Federal Taxpayer's Identification Number
	NM109	Other Subscriber Identifier		This field is set to SSN of Other Subscriber
2100	REF	Other Claim Related Identification		
	REF01	Reference Identification Qualifier	EA, F8	NCTracks sends values "EA" and "F8"

11. Change Summary

Date	Change	Responsible Party
November 16, 2012	Initial trading partner test version	CSC under the direction of NC DHHS
July 01, 2013	Production version	CSC under the direction of NC DHHS
September 08, 2014	CAQH-CORE Phase III standards draft template version	CSC under the direction of NC DHHS
November 02, 2014	CAQH-CORE Phase III update	CSC under the direction of NC DHHS
February 03, 2016	Update to Fiscal Agent name and logo	CSRA under the direction of NC DHHS